And with each new round of reforms in Greece, misery and unrest are on the rise. Strikes and angry street protests are a daily occurrence, as unions fight decreases in pay and benefits for their workers, students protest the lack of opportunity and ordinary citizens resist reforms and tax increases. The confrontation with authorities is impeding business and destroying tourism, deepening the crisis further.

Some of that struggle is for naught. The Greek government couldn't reduce austerity measures if it wanted to. Fiscal policy is now out of its hands and likely to remain so for decades, perhaps generations.

And while most Greeks agree the bloated state must be streamlined, they're stiffening their resistance to reform. That's why many in the euro zone believe Greece must default in order to rebuild a more efficient government.

America isn't in that predicament—yet. But there are cautionary lessons to be lifted from the outraged streets of Athens. As the Greek example shows, government largesse is easy to expand but difficult to cut back without inflaming people.

For years our politicians have framed increases to government benefits as compassionate and obligatory. Now all that overspending must be pared back and government programs reformed to curb the federal deficit. But each round of needed cuts and reforms will likely cause misery—in an amount substantially greater than the happiness generated by spending increases.

Behavioral economics, which uses social and psychological factors to predict a population's decision-making behavior, captures this paradox in two fundamental principles.

First, the principle of "loss aversion" explains that people hate to lose something more than they value receiving something. So, even if many Americans don't value existing government programs and spending very highly, they will likely be very unhappy about the loss of those same goods and services.

Second, even if you streamline our government and make programs more efficient, the "endowment effect" predicts that people will still oppose changes to the benefits they receive. This is because people tend to value the goods and services they have more than they do equivalent replacement goods and services. The endowment effect makes it very difficult to exchange existing benefits for new ones and thus to "reform" government programs.

Whether we cut spending and make reforms now or later, course correction will be difficult and even potentially dangerous to our nation's stability. Just look at the resistance of public employees in Wisconsin, Indiana and elsewhere to relatively minor cuts to see how people will contest vigorously any decreases to their benefits and programs.

Behavioral economics teaches us that any time we make changes and reduce government benefits and programs, we can expect people to be very upset about those decisions—and likely resist them. Still, we need significant reforms and deep cuts to put the U.S. on track toward a balanced budget.

Paring back government will undoubtedly cause misery and social dislocation. However, "death" by a thousand small cuts will intensify civil unrest and may produce revolutionary fervor unlike anything we've seen in America in our lifetime. Our nation will be better off by reforming our system radically, in a single dramatic turn, rather than piecemeal—or face something very like the furious streets of Athens.

PREMATURITY AWARENESS MONTH

Mr. BROWN of Ohio. Mr. President, November is Prematurity Awareness Month, but as the month comes to an end, our fight against preterm births and complications caused by prematurity continues daily in hospitals, homes, and research facilities across the country.

Each year in the United States, more than half a million babies are born prematurely. More startling, over the last 25 years, the rate of preterm birth has increased more than 36 percent. Today, prematurity is the leading cause of newborn death in the United States.

Additionally, a preterm baby is four times more likely to have at least one medical condition, such as cerebral palsy and learning and behavioral problems. And the life-long health complications caused by pre-term birth also have a serious financial burden on the child and parent. A premature birth costs, on average, \$51,000 in the first year alone; premature births cost our nation \$26 billion annually. Yet, despite the costs in lives lost and families burdened, medical research and innovation continues find new cures and therapies.

On the Federal level, beginning in 2003, the National Institutes of Health (NIH) invested approximately \$21 million in research for a drug-progesterone or 17P—to prevent preterm birth. 17P was found to reduce preterm births by 37 percent in high-risk pregnancies, and compounding pharmacists were able to provide compounded 17P to women for a mere \$10-\$20 a dose. Earlier this year, however, a pharmaceutical company received exclusive rights to manufacture the drug and increased the price by 14,900 percent to \$1,500 a dose. But because of the advocacy of Ohio's leading children's hospitals from Cleveland to Cincinnatibecause of the stories of pregnant women I met in airports and community halls, we raised the public's awareness to the astronomical price gauge and increased public demand against the company to reconsider its pricing. The company eventually reduced the cost of its branded version of 17P, Makena, from \$1,500 a dose to \$690—still significantly more expensive than the compounded version. Given the public and Congressional outcry and the importance of the medication to pregnant women and their babies, the Food and Drug Administration (FDA) announced that compounding pharmacies would still able to offer women the more affordable version of 17P. Our work continues to make such a life-saving drug more affordable and available to millions of women who depend on it.

But despite the success of 17P in preventing preterm births, more needs to be done. Every year March of Dimes grades each state on their rates of premature birth. While Ohio is improving, the current 12.3 percent premature birth rate—or 500,000 children annu-

ally—leaves Ohio with a C grade. Fortunately, hospitals, patients groups, and public-private partnerships are working to reduce preterm births in Ohio.

In 2009, central Ohio's four hospital systems-Nationwide Children's Hospital. The Ohio State University Medical Center, OhioHealth, and Mount Carmel Health System—as well as the Columbus Public Health Department, Franklin County's Board of Commissioners, and non-profit groups came together through Ohio Better Birth Outcomes (OBBO) to reduce the number of preterm births in Franklin County. OBBO's efforts include home nurse visits to low-income mothers from the 28th week of gestation through the child's second birthday and education and counseling for mothers about "safe spacing" of pregnancies. By allowing their bodies at least 18 months to fully heal between pregnancies, their subsequent pregnancies will be healthier. Through this work, OBBO was able to increase gestation time by an average of six weeks and two days. For each week a woman is able to carry her baby between 36 weeks and 39 weeks, the baby has a 23 percent decrease in respiratory diseases, seizures, brain hemorrhages, and other complications.

Ohio is also home to the Ohio Perinatal Quality Collaborative, which consists of 45 clinical teams from 25 Ohio hospitals. The Collaborative, based at Cinncinati Children's Hospital Medical Center, includes all of Ohio's children's hospitals as well as regional hospitals such as Akron's Summa Health System, the Toledo Hospital, the Mount Carmel Hospital System, St. Elizabeth's Health Center in Youngstown, and Miami Valley Hospital in Dayton. Twenty-four teams are focusing on reducing catheter associated infections in preterm babies and the other 21 teams are focusing on reducing the number of deliveries that occur between 29 and 36 weeks gestation.

In my hometown of Mansfield in Richland County, Ohio, the Community Health Access Project (CHAP) stepped in after discovering that certain groups of women were three times more likely to give birth to a low birth weight infant. Through a series of community outreach initiatives, CHAP community health workers and local volunteers were able to identify and break down barriers, such as transportation needs and cultural differences, to better address the health needs of at-risk pregnant women. In its first three years, the number of low birth weight babies in the region showed a decline from 22.7 percent to 8 percent and CHAP has become a national model in community health services.

At University Hospitals (UH) in Cleveland, the MacDonald Women's Hospital and Rainbow Babies & Children's Hospital implemented a Centering Pregnancy Program in 2010. This unique, group-based program targets socially at-risk women who are least likely to receive consistent prenatal

care and have the greatest risk of having a low birth weight baby or delivering prematurely. The program has enabled UH to dramatically reduce incidences of preterm births and low birth weight babies by 8 percent and 8.7 percent below the national average respectively.

November has come to an end, but I look forward to continue working with organizations and health systems in Ohio and across the country to reduce premature births and ensure a healthy start in life for our Nation's children.

ADDITIONAL STATEMENTS

REMEMBERING JIM CAPOOT

• Mrs. BOXER. Mr. President, I ask my colleagues to join me in honoring the life of James "Jim" Capoot, a dedicated husband, proud father, loving son, devoted friend, and respected colleague. Officer Capoot lost his life in the line of duty while serving the Vallejo Police Department on November 17, 2011. He was 45 years old.

Jim Capoot was originally from Little Rock, AR and served in the U.S. Marine Corps and as a California highway patrol officer before joining the Vallejo Police Department in 1992. Officer Capoot was a highly decorated officer having received the Vallejo Police Department Officer of the Year Award, the Medal of Merit, the Life Saving Medal, and twice awarded the Medal of Courage. In addition to his work with the police department, Officer Capoot was the volunteer coach of the Vallejo High School girls' basketball team and led the team to a section championship in 2010.

Officer Jim Capoot, like all those who serve in law enforcement across California, put his life on the line to protect his community. I extend my deepest condolences to his loving wife Jessica and three daughters. My thoughts and prayers are with them. We are forever indebted to him for his courage, service, and sacrifice.

TRIBUTE TO RANCOURT & CO. SHOECRAFTERS

• Ms. SNOWE. Mr. President, my home State of Maine boasts countless entrepreneurs who are working to ensure that our State and Nation have a vibrant, growing economy for years to come. Michael and Kyle Rancourt, a dynamic father and son duo, exemplify this vibrant entrepreneurial spirit. Through ingenuity and hard work, they have developed and maintained a thriving shoemaking business based in the central Maine city of Lewiston, which was once a hub for the industry. Today I wish to commend and recognize the Rancourt founders of & Shoecrafters for their success and commitment to their business and local community.

The Rancourt family has provided superb quality shoes for three generations. The family began its business in 1964. However, 11 years ago, Mike Rancourt sold the small family shoe business to Allen-Edmonds, which at the time was its largest client. Soon after, due to a struggling economy, the U.S. shoe industry experienced tremendous difficulties, and it became necessary for Allen-Edmonds to reduce its staff and close the Lewiston factory originally owned by the Rancourts.

Aware of these developments and reluctant to see the shoe factory which provided so many throughout the community with jobs, Michael and Kyle Rancourt decided to buy the factory back from Allen-Edmonds in 2009, reviving their passion for shoe making. The Rancourts began anew with just 20 employees but quickly found success in what many considered to be a dying domestic industry as more shoe manufacturers expanded overseas. A shifting demand for domestically made, quality products provided the company with a growing consumer base and a steady source of revenue.

This small business uses resources purchased from around the world to hand-make men's dress and casual shoes using the traditional method known as "last." This meticulous process involves employees hand-fitting leather into a shoe form, tacking the leather pieces in place, and then hand-stitching them with waxed threads and needles. The result of this process is a shoe that is recognized around the world for its superior quality and genuine comfort.

Looking at the new Rancourt & Co. today, it is difficult to imagine that it once faced extinction. The company has grown to over 50 employees today and has increased the number of men's shoes it manufactures on a weekly basis from 250 to 1.000. These fine-crafted products are sold throughout the United States as well as in international locations such as Hong Kong, India, the United Arab Emirates, and Japan. This small firm continues to expand, and in July, the company launched an online store which already grosses between \$8,000-\$10,000 week.

Small businesses like Rancourt & Co. Shoecrafters are critical to the economic health of our country and our local communities. During a time of heightened global competitiveness, Michael and Kyle Rancourt were able to revive and renew their business and compete in an environment that many thought was simply too difficult and taxing for domestic manufacturers. As a result of their efforts, the company has prospered, preserving jobs in a local Maine community while showing the world what American small businesses are truly capable of. I congratulate everyone at Rancourt & Co. Shoecrafters for their remarkable success and wish them many more years of accomplishment.

RECOGNIZING BENTON COUNTY DRUG COURT

• Mr. WYDEN. Mr. President, the Benton County Drug Treatment Court is a shining example of our Nation's drug court system. As one of only 10 mentor courts in the Nation, the Benton County Drug Treatment Court serves as a model program for the over 2,500 treatment courts in the United States. This achievement is especially significant given that the Benton County Drug Treatment Court started as an ambitious pilot program only 10 years ago.

The positive impact drug treatment courts have on individuals, families, and communities throughout our country is remarkable. Due to tireless efforts underway since the first drug court was established over 20 years ago, there is now a system in place which, if completed, reduces the likelihood of drug relapse for individuals, provides increased housing stability, and brings families together. The positive outcomes from completion of drug courts are well documented and benefit those outside the system as well by reducing costs to the taxpayer.

Congratulations to the Benton Country Drug Court on their 10th anniversary. Because of innovative solutions like drug courts, our country is one step closer to breaking the cycle of addiction which has plagued our country for far too long.

MESSAGES FROM THE PRESIDENT

Messages from the President of the United States were communicated to the Senate by Mr. Pate, one of his secretaries.

EXECUTIVE MESSAGES REFERRED

As in executive session the Presiding Officer laid before the Senate messages from the President of the United States submitting sundry nominations which were referred to the appropriate committees.

(The nominations received today are printed at the end of the Senate proceedings.)

MESSAGE FROM THE HOUSE

At 12:25 p.m., a message from the House of Representatives, delivered by Mrs. Cole, one of its reading clerks, announced that the House has passed the following bills, in which it requests the concurrence of the Senate:

H.R. 1801. An act to amend title 49, United States Code, to provide for expedited security screenings for members of the Armed Forces.

H.R. 2192. An act to exempt for an additional 4-year period, from the application of the means-test presumption of abuse under chapter 7, qualifying members of reserve components of the Armed Forces and members of the National Guard who, after September 11, 2001, are called to active duty or to perform a homeland defense activity for not less than 90 days.

H.R. 2465. An act to amend the Federal Employees' Compensation Act.